ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	int		03-12-01
O.I.P.E. CLASSIFIER	MTW	D	03-28-d
FORMALITY REVIEW	1/14	572	05-23-01
RESPONSE FORMALITY REVIEW	RM	781	09-18-01

INDEX OF CLAIMS

✔ .... Rejected	N .... Non-elected	
= .... Allowed	I .... Interference	
– (Through numeral)... Canceled	A .... Appeal	
÷ .... Restricted	O .... Objected	

Claim Final	Original	10/2/03	2/5/04	Date
1	1	✔	✔	
	2	✔	✔	
	3	✔	✔	
	4	✔o	✔	
	5	✔o	✔	
	6	✔	✔	
	7	✔	✔	
	8	✔	✔	
	9	✔	✔	
	10	✔	✔	
11	11	✔	✔	
	12	✔	✔	
	13	✔	✔	
	14	✔	✔	
	15	✔	✔	
	16	✔	✔	
	17	✔o	✔	
18	18	✔	✔	
	19	✔	✔	
	20	✔	✔	
	21	✔o	✔	
	22	✔o	✔	
	23	✔	✔	
	24	✔	✔	
	25	✔	✔	
	26	✔	✔	
	27	✔	✔	

(claims 28–50 blank)

(claims 51–100 blank)

(claims 101–150 blank)

If more than 150 claims or 10 actions
staple additional sheet here

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